.Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2008

Department of the Treasury

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Fo	r the 2008 calendar year, or tax year beginning 7/01 , 2008, and en	nding 6	/30 ,	2009
	ck if applicable		D Employer Identifi	cation Number
	Address change Please use Princess Anne High School Marching Ba	ınd	51-02118	54
	Name change or type 4400 Virginia Beach Blvd		E Telephone number	
-	See Virginia Beach, VA 23462		757-343-	
-	Initial return specific Instruc-		737 343	2027
<u> </u>	Termination tions.			1 051 50
<u> </u>	Amended return	1117-3 1- 41-	G Gross receipts \$	1,251,53
L	Application pending F Name and address of principal officer		is a group return for affilia all affiliates included?	₽' " ₽
	Same As C Above	If 'No	o, attach a list (see instr	uctions) Yes
l Ţ	ax-exempt status \overline{X} 501(c) (3) (insert no) 4947(a)(1) or 527	<u>'</u>		
J V	Vebsite: ► N/A		p exemption number	
	ype of organization Corporation Trust Association Other L Year of Fi	ormation	M State of leg	yal domicile
Part	Summary Briefly describe the organization's mission or most significant activities To Edu	icate an	d Instruct h	and members
Activities & Governance				
Meri .				
8 1	Check this box if the organization discontinued its operations or disposed of Number of voting members of the governing body (Part VI, line 1a)	n more man	3	
অঙ ু	Number of independent voting members of the governing body (Part VI, line 1b).		4	
ie lie	Total number of employees (Part V, line 2a)		5	
∄ ≩	Total number of volunteers (estimate if necessary)		6	
Ac :	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)		7a	
	b Net unrelated business taxable income from Form 990-T, line 34		7b	
			Prior Year	Current Year
	Contributions and grants (Part VIII, line 1h)		18,327.	12,59
2 I	Program service revenue (Part VIII, line 2g)		33,507.	45,55
ا ج ا	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,955.	56
e 1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	—	136,528.	49,05
	2 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		190,317.	107,76
1:			12,500.	17,00
1/1	Benefits paid to or for members (Part IX, column (A) the WEIVED		12,300.	17,00
		-	-	
စ္ခ 1 <u>!</u>	\mathbf{O}			
Expenses	From Professional fundralsing fees (Part IX, column) Imp (1) 2 7 2010			
X	b Total fundraising expenses (Part IX, column (□), 1 ne 25) ► 87,43	<u> </u>		
س 1)	Other expenses (Part IX, column (A), lines 11a 11d, LV 249) FALLEY	ł	172,793.	175,31
11		,	185,293.	192,31
19	Revenue less expenses Subtract line 18 from line 12		5,024.	-84,54
		Pos	inning of Year	
9 2 2	Total assets (Part X, line 16)	Бей	218,288.	End of Year 138,17
8 2		-	210,200.	4,43
95			218,286.	
Part			210,280.	133,73
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules an true, correct, land complete. Declaration of preparer (other than officer) is based on all information of which	id statements, a	nd to the best of my know	vledge and belief, it is
	1 'k M- ,	preparer has an		
Sign	- lines 10 wood		5-11-20	<i>ווט</i> וי
Here	Signature of officer		Date	
	► Karen Norwood	Pres	sident	
	Type or print name and title			
	Daje		Check if Pre	parer's identifying numb
Paid	Paje MAY	1 1 20	Check if Prej	anstructions)
Pre-	Preparer's signature Stephen Merritt		N/	'Δ
parer	's Stephan Herrice			11
Use	Ligura de alt		NT / 7	
Only	employed). address, and with CTINIA PEACH WAS 22462 6542		EIN N/A	100 5550
	ZIP+4 VIRGINIA BEACH, VA 23462-6543		Phone no ► (757	
	e IRS discuss this return with the preparer shown above? (see instructions)			X Yes N
BAA F	or Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.		TEEA0112L 12/22/0	8 Form 990 (2

		-0211854		age 2
Par	t'III Statement of Program Service Accomplishments (see instructions)			
1	Briefly describe the organization's mission:			
	To Educate and Instruct band members.			
				-
		-		
2	Did the organization undertake any significant program services during the year which were not listed on the pri		-	
	Form 990 or 990-EZ?	Ye	s X	No
	If 'Yes,' describe these new services on Schedule O			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	☐ Ye	s X	No
_	If 'Yes,' describe these changes on Schedule O			
	Describe the exempt purpose achievements for each of the organization's three largest program services by exp	onese Saction	501(6)(3/
4	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and alloca	itions to others	the total	a)
	expenses, and revenue, if any, for each program service reported		,	
4 a	(Code:) (Expenses \$ 49,089. including grants of \$) (Revenue))
	Travel and Lodging Cost for Band Members to Appear At Competitions and	<u>Parades</u>		
				
		-		
		_		
		-		
41	(Code. (Expenses \$ 38,500. including grants of \$) (Revenue)	ıe \$)
	Payments to Third Parties to Instruct Band Members on Their Instrument		lor	
	County on Their Doubines			
	Guard on Their Routines.			-
		-		
			-	
			- <i></i> -	
				
40	: (Code) (Expenses \$56,562. including grants of \$) (Revenue))
	Equipment Repairs, Supplies, Entry Fees, Music, Awards, and Purchases	to Allow	<u>_the</u> _	
	Band to Perform in Various Competitions and Parades.		=	
			- -	
			-	
			- 	
			- -	
				-
40	Other program services (Describe in Schedule O) See Schedule O			
	(Expenses \$ 17,000. including grants of \$) (Revenue \$)	
46	e Total program service expenses ► \$ 161, 151. (Must equal Part IX, Line 25, column (B))			

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(cX3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III.	16		Х
17	, , , , , , , , , , , , , , , , , , , ,	17		Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, go to question 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
i	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV		-	
	with other person(s) listed in Fart viii, Section Aj. II Tes, complete Schedule L, Fart IV	20a		
	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		<u>x</u>
,	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	-	х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
BA/		Form	990	(2008)

	<u></u>		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns Enter -0- if not applicable	1a 0			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		1	
c Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	1 c	-	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 0	_		
2b If at least one is reported on line 2a, did the organization file all required federal employment	tax returns?	2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this retu		-		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year this return?		3a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3ь		
4a At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial.)	or other authority over, a lancial account)?	4a		X
b If 'Yes,' enter the name of the foreign country: ▶				
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Financial Accounts.	oreign Bank and		. ~	
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction?	5b		<u>X</u>
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp Prohibited Tax Shelter Transaction?		5 c		
6a Did the organization solicit any contributions that were not tax deductible?		6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such condeductible?		6Ь		
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization provide goods or services in exchange for any quid pro quo contribution	of more than \$75?	7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh Form 8282?		7c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year .	7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premium benefit contract?		7e		_ X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene	fit contract?	7f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as re	equired?	7g		X
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Fo		7h		Х
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and supporting organizations. Did the supporting organization, or a fund maintained by a sponso excess business holdings at any time during the year?	section 509(a)(3) ring organization, have	8		
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?		9a		
b Did the organization make any distribution to a donor, donor advisor, or related person?		9b		
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter.				
a Gross income from other members or shareholders	11 a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 6		_	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	Form 1041? 1	2a		
	12 b			
BAA	Fo	orm 9	90 (2	2008

Form 990 (2008) Princess Anne High School Marching Band 51-0211854 Page (Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

B Did the organization contemporaneously document the meetings held or written actions undertaken dithe following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9a Does the organization have local chapters, branches, or affiliates? b If 'Yes,' does the organization have written policies and procedures governing the activities of such chand branches to ensure their operations are consistent with those of the organization? 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization in Schedule 0 the process, if any, the organization uses to review the Form 990 Sec. Scr. It is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be roganization's mailing address? If 'Yes,' provide the names and addresses in Schedule O' Section B. Policies 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that coul to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'No,' go to line 13 b Does the organization have a written whistleblower policy? 13 Does the organization have a written obcument retention and destruction policy? 14 Does the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangementity during the year? b If 'Yes,' has the organization adopted a written p	nana	ianag	<u>jemen</u>	ιτ								_			
b Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the of officers, directors or trustees, or key employees to a management company or other person? See 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Eo Sch 0 5 Did the organization become aware during the year of a material diversion of the organization's asset fooes the organization have members or stockholders? 7 a Does the organization have members, stockholders, or other persons who may elect one or more mer governing body? b Are any decisions of the governing body subject to approval by members, stockholders, or other persons. B Did the organization contemporaneously document the meetings held or written actions undertaken did the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9 a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chand branches to ensure their operations are consistent with those of the organization? 10 Was a copy of the Form 990 provided to the organization's governing body before it was flied? All org describe in Schedule O the process, if any, the organization's provide in Schedule O the process, if any, the organization's review the Form 990. Sec Schedule of schedule of the process of a far, the organization's realing address? If "Yes," provide the names and addresses in Schedule O those this is done 12 a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that coul to conflicts? Does t	below, See ii	oelow, See in	and for structio	r a 'No ons.	' respo	onse to	lines 8	or 9b below	v, de	escribe	the circ	umstance	s,	Yes	No
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the of officers, directors or trustees, or key employees to a management company or other person? See 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? See Sch 0 5 Did the organization become aware during the year of a material diversion of the organization's asset 6 Does the organization have members or stockholders, or other persons who may elect one or more mergoverning body? 7a Does the organization become aware during the year of a material diversion of the organization's asset 6 Does the organization have members or stockholders, or other persons who may elect one or more mergoverning body? 9a Does the organization contemporaneously document the meetings held or written actions undertaken dithe following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9a Does the organization have local chapters, branches, or affiliates? blf Yes,' does the organization have written policies and procedures governing the activities of such chard branches to ensure their operations are consistent with those of the organization? 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All org describe in Schedule O the process, if any, the organization uses to review the Form 990 See Scf 11 is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be rorganization's mailing address? If 'Yes,' provide the names and addresses in Schedule O conflicts? 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that coul to conflicts? c Does the org	of the	of the g	governin	ng body	y					1 a			5	١.	
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15 Did the process for determining compensation of the following persons include a review and approval persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluin joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization with respect to such arrangements? Section C. Disclosures 17 List the states with which a copy of this Form 990 is required to be filed ► None 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T inspection Indicate how you make these available Check all that apply. □ Own website □ Another's website ▼ Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O State the name, physical address, and telephone number of the person who possesses the books and			•	,									13		<u>X</u>
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b Other officers of key employees of the organization? Describe the process in Schedule O. (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluin joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization with respect to such arrangements? Section C. Disclosures 17 List the states with which a copy of this Form 990 is required to be filed ► None 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T inspection Indicate how you make these available Check all that apply. □ Own website □ Another's website □ X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O State the name, physical address, and telephone number of the person who possesses the books and	empor	emporai	neous s	substa	intiatioi	n of th	ie deliber	a review an ation and d	nd ap decis	pprova sion:	i by ind	ependent			ļļ
Describe the process in Schedule O. (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluin joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization with respect to such arrangements? Section C. Disclosures 17 List the states with which a copy of this Form 990 is required to be filed ► None 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T inspection Indicate how you make these available Check all that apply. □ Own website □ Another's website ▼ W Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and				_	ement	officia	l?						15a		<u>X</u>
 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger entity during the year? b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization with respect to such arrangements? Section C. Disclosures 17 List the states with which a copy of this Form 990 is required to be filed ► None 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☐ Another's website X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and 	-	-											15 b		<u>X</u>
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evalue in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to evalue in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization organization to gradient to be filed ► None 17 List the states with which a copy of this Form 990 is required to be filed ► None 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T inspection Indicate how you make these available Check all that apply. 19 Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and				•	ıcıpate	e in a jo	oint venti	ire or simila	ar a	rrange	ment w	th a taxab			-
in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the orga status with respect to such arrangements? Section C. Disclosures 17 List the states with which a copy of this Form 990 is required to be filed ► None 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T inspection Indicate how you make these available Check all that apply. □ Own website □ Another's website □ X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and	a writt	a writte	en policy	y or pr	rocedui	ıre requ	uiring the	organizatio	on te	o eval	uate its	participatio	_16a		<u>X</u>
 17 List the states with which a copy of this Form 990 is required to be filed ► None 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T inspection Indicate how you make these available Check all that apply. ☐ Own website ☐ Another's website ☐ William Town Town Town Town Town Town Town Town	oplicat	plicable	le feder	ral tax	law, a	nd tak	en steps	to safegua	rd th	he org	anızatıo	n's exemp	16b		
 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T inspection Indicate how you make these available Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O State the name, physical address, and telephone number of the person who possesses the books and 			000	_					_				 .		
Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and				•				- -				_			
 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, constatements available to the public See Schedule O State the name, physical address, and telephone number of the person who possesses the books and 				orms 1 Check				able), 990,	and	1 990-1	「(501(c)	(3)s only)	avaılab	le for	oublic
20 State the name, physical address, and telephone number of the person who possesses the books and						-	•				4 1 •		_1		
															incial
► Karen Norwood 4400 Virginia Beach Blvd Virginia Beach VA 23462														ion _ _	

BAA

Form 990 (2008)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order, individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)			•	c)			(D)	(E)	(F)
Name and Title	Average hours per week	ndividual trustee or director	institutional trustee		Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Karen Norwood						e.				
President	12							0.	0.	0.
Teresa Juillerat Vice President	10							0.	0.	0.
Christine Bell Secretary	4							0.	0.	0.
Mike Bartha Treasurer	10							0.	0.	0.
Cynthia Edmunds Bingo Manager	30					-		0.	0.	0.
Mischelle Keller FOPS Coordinato	8							0.	0.	0.
								0.	0.	0.
	- "									
					:	_	-			

TEEA0107L 04/24/09

(A)	(B)	Pos	tion ((check	C)	hat a	anka	(D)	(E)	(F)
Name and Title	Average hours per week	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
									:	
		_								
				'		ł				
1 b Total							<u> </u>	0.	0.	0.
2 Total number of individuals (including those in 1a) vorganization ► 0	vho rece	eive	d m	ore ·	than	\$10	00,0	00 ın reportable c	ompensation from	Yes No
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such if 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater trindividual 5 Did any person listed on line 1a receive or accrue or 	portable han \$15	e coi 50,00	mpe)0?	nsa If 'Y	tion es'	and com	l oth plet	ner compensation e Schedule J for s	from such	3 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch Section B. Independent Contractors	nedule J	l for	suc	h pe	erso	n.	erate	ed organization to	Services	5 X
Complete this table for your five highest compensation from the organization	ed inde	pen	dent	cor	ntrac	ctors	tha	at received more t	han \$100,000 of	
(A) Name and business addres	s						Description of	of Services	(C) Compensation	
								 		
2 Total number of independent contractors (including compensation from the organization ▶ 0	those in	1 1)	who	rec	eive	ed m	ore	than \$100,000 in		
							_			

Pa	t VIII Statement of Revenue			· · · · · · · · · · · · · · · · · · ·	·
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
2 3	1a Federated campaigns 1a				
ANT	b Membership dues 1b				
₽. 6	c Fundraising events 1c 12,59	6.			
FE	d Related organizations 1d				
S,G	e Government grants (contributions) 1 e				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above				
IRI	g Noncash contribns included in lns 1a-1f: \$				
A G	h Total. Add lines 1a-1f	▶ 12,596.	`		
-B	Business Code				
ÆN	2a Cavalier Classic	14,694.			14,694.
Æ	b Activity Fees	22,878.			22,878.
JCE	c Other	7,979.			7,979.
SER	d				
A.M.	e				
GR	f All other program service revenue				
PRO	g Total. Add lines 2a-2f	▶ 45,551.			1
	3 Investment income (including dividends, interest and				
i	other similar amounts)	▶ 565.			565.
	4 Income from investment of tax-exempt bond proceed	s >			· · · · · · · · · · · · · · · · · · ·
	5 Royalties	•			
	(i) Real (ii) Persona	<u> </u>			1
	6a Gross Rents				
	b Less rental expenses.				
	c Rental income or (loss)				ļ
	d Net rental income or (loss)	>			_
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)	>			
IUE	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c).				į
R	See Part IV, line 18 a 1,192,82	26.			
불	b Less: direct expenses . b 1,143,77	2.			
0	c Net income or (loss) from fundraising events	► 49,054.			49,054.
	9a Gross income from gaming activities See Part IV, line 19				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities.	•			
	10a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b				'
	c Net income or (loss) from sales of inventory	•			
	Miscellaneous Revenue Business Code	,			<u> </u>
	11 a				
	b				
	с				
	d All other revenue				
	e Total. Add lines 11a-11d.	-			
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9 10c, and 11e	^{9c,} ► 107,766.	0.	0.	95,170.

Part'IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp		not required to complete a		(D).
Do 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				,
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	17,000.	17,000.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
	Fees for services (non-employees)				
	Management				
t	Legal				
	: Accounting	1,516.		1,516.	
	Lobbying				
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
ç	g Other				
12	Advertising and promotion	1,782.	1,782.	1 2 2 2	
13	Office expenses	1,869.		1,869.	
14	Information technology	600.		600.	
15	Royalties.				
16	Occupancy				
17	Travel	8,996.	8,996.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,313.	8,313.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	16,737.		16,737.	
23 24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25	,			i
	below.) a Instructors	38,500.	38,500.		
	Spring Trip	26,500.	26,500.		
	Band Attire	15,065.	15,065.		
	Cavalier Classic	13,593.	13,593.		
	Fundraising materials	8,439.	13,393.		8,439.
	All other expenses	33,403.	31,402.	2,001.	0,433.
	·	192,313.	161,151.	22,723.	8,439.
26	Total functional expenses. Add lines 1 through 24f Joint Costs. Check here ► ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	192,313.	101,151.	22,123.	8, 439.

PE	<u> </u>	Balance Sneet											
	•				(A) Beginning of year		(E End o	3) of year					
	1	Cash - non-interest-bearing.			59,332.	1		20,95	Ō.				
	2	Savings and temporary cash investments			117,843.	2		89,40					
	3	Pledges and grants receivable, net				3							
	4	Accounts receivable, net				4							
	5	Receivables from current and former officers, director or other related parties. Complete Part II of Schedule	s, trus L	itees, key employees,		5							
	6	Receivables from other disqualified persons (as defin-		F									
		and persons described in section 4958(c)(3)(B). Com	olete F	Part II of Schedule L		6							
ASSETS	7	Notes and loans receivable, net				7							
S	8	Inventories for sale or use				8							
T S	9	Prepaid expenses and deferred charges.			<u> </u>	9							
	10 a	Land, buildings, and equipment, cost basis	10a	61,368.			···						
	b	Less accumulated depreciation Complete Part VI of											
		Schedule D	10 ь	33,552.	41,113.	10 c		27,81	6.				
	11	Investments — publicly-traded securities	·			11							
	12	Investments – other securities See Part IV, line 11				12							
	13	Investments – program-related. See Part IV, line 11				13							
	14	Intangible assets				14		,	_				
	15	Other assets. See Part IV, line 11				15							
	16	Total assets Add lines 1 through 15 (must equal line	34)		218,288.	16	1	38,17	4.				
	17	Accounts payable and accrued expenses				17		4,43					
	18	Grants payable				18							
	19	19 Deferred revenue											
Ļ	20												
Å													
LIABILITIES	ľ												
Į		highest compensated employees, and disqualified per											
į													
Š	23												
	24	24											
	25	Other liabilities. Complete Part X of Schedule D			2.	25			<u>2.</u>				
	26	Total liabilities. Add lines 17 through 25			2.	26		4,43	5.				
N E T	-	Organizations that follow SFAS 117, check here ▶	X ar	nd complete lines									
		27 through 29 and lines 33 and 34.							_				
ASSE	27	Unrestricted net assets .			218,286.	27	1	33,7 <u>3</u>	<u>9.</u>				
Ĕ	28	Temporarily restricted net assets		_		28							
Š	29	Permanently restricted net assets.				29							
R		Organizations that do not follow SFAS 117, check he	re 🟲	and complete			- -						
FUZD		lines 30 through 34.		_					_				
Ŋ	30	Capital stock or trust principal, or current funds				30		_					
B	31	Paid-in or capital surplus, or land, building, and equip	ment	fund . [31							
BALAZCES	32	Retained earnings, endowment, accumulated income,	or oth	ner funds		32							
Ğ	33	Total net assets or fund balances.		.[218,286.	33	1	33,73	9 .				
	34	Total liabilities and net assets/fund balances		[218,288.	34	1	38,17	4.				
Pa	art X	Financial Statements and Reporting											
								Yes N	ю				
1	Acc	counting method used to prepare the Form 990 \overline{X} C	ash	Accrual	Other								
2	a We	re the organization's financial statements compiled or	review	red by an independent a	accountant? .		2a	3	ĸ .				
		re the organization's financial statements audited by a		•			2b		X				
		Yes' to 2a or 2b, does the organization have a committ iew, or compilation of its financial statements and sele		•	y for oversight of the a	udıt,							
							2c						
3	a As	a result of a federal award, was the organization requidit Act and OMB Circular A-133?	red to	undergo an audit or au	dits as set forth in the	Single			X				
		Yes,' did the organization undergo the required audit or	- audit	e?	• •		3a 3b	- 	<u>, </u>				
BA		100, and the organization undergo the required addit of	audit	·	 			990 (20	08)				
	-							1-0	_,				

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number

OMB No 1545-0047

Prin																					211854			
Part I	F	Reas	on	for i	ub	lic	Cha	rity	Statu	ıs (/	۱li or	gan	ızatı	ons	must	con	nple	te this	part.) (see	instruc	tions)_		
The org	janı	zatioi	ısı	not a	priva	ate f	ound	ation	becau	use it	t is. (F	Pleas	se che	ck o	nly one	org	anıza	ation.)						
1 [_] A	chur	ch, (conve	ntio	n of	chur	ches	or ass	ociat	tion of	f chu	rches	desc	cribed ii	n se	ctior	170(b)	(1)(A)(i).				
2	_										-		Sched											
3 [hedule h			
4 [_] A	med	ıcal	resea	rch	orga	ınızat	tion o	perate	ed in	conju	ınctıo	n with	hah	ospital	desc	ribe	d in sec	ction 17	70(b)(1)(A)(iii) E	nter the	hospita	l's
	_ n	ame,	cıty	, and	stat	e		-	:					. – <u>-</u>		.								
5 [1	70(b)	(1)(4	\) (iv).	(Co	ompi	ete F	art II)												al unit de	scribea	ın secu	on
6 7																		70(b)(1			n the ge	neral ni	iblic des	cribed
' [76	sec	tion	170(L)(1)	(A)(v	i) . (Comp	lete P	art I)	ai pa	ai (Oi i	113 30	ipport	10111	a go	vermin	intai un	01 1101	n the ge	noral po	Dilo dos	onboa
8 <u>[</u>															te Part									
9 [fr Ir	om a	ctivit nen	ies rel t inco	ated me a	l to it and	s exe unrel	empt fi lated	unctior	ns – ess ta	subjec axable	et to c	certain ome (exce	entions.	and	(2) n	o more	than 33	-1/3 % o	ees, and f its supp iired by t	ort from	aross	after
10	一 A	n org	janiz	ation	orga	anızı	ed ar	nd ope	erated	excl	lusive	ly to	test fe	or pu	iblic sa	fety.	See	section	n 509(a)(4). (se	e instruc	ctions)		
11 [ーm	nore i	bubli	clv su	oaaı	rted	ora	anıza	tions (descr	ribed i	in se	ction plete	509(a	a)(1) or s 11e th	sec roug	tion jh 11	509(a)(Ih	2) See	of, or ca section	arry out t 1 509(a)(3	he purp 3). Ched	oses of ck the b	one or ox that
	а		Гуре	1			b	T;	ype II			c [Ту	pe III	l – Fun	ictior	nally	ıntegra	ted		d 🔝	Type	III- Oth	er
e [ー tt	ian f	ound	ig this lation	bo: mai	x, I d nage	ertify ers ar	y that nd oth	the o er tha	rganı an on	ızatıor ıe or r	n is n	not co publi	ntroll cly si	led dire upporte	ctly d or	or in gani	directly zations	by one describ	e or more ed in se	e disqual ection 50	lified pe 9(a)(1) (rsons o	ther
f	509(a)(2). f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box																							
g	S	ince	Aug	ust 17	7, 20	06,	has t	he or	ganıza	ation	acce	pted	any g	ıft o	r contri	butic	n fro	om any	of the	following	g persons	s ⁷		
																							Yes	s No
	(i) á	a per pelov	rson v v. the	vho : aov	dıred Verni	ctly o na be	or indi odv o	rectly f the s	cont	rols, e orted	either ordar	r alon nızatıc	e or i	togethe	er Wil	n pe	ersons c	lescribe	ed in (ii)	and (III)	11 g	(i)	
	G				-		_	-	n des			_										11 g	· · · · · · · · · · · · · · · · · · ·	1
	•	•		-				•			•	•		(II) al	bove?							11 g		1
h	P	rovid	e th	e follo	wın	g ınf	orma	ation a	about	the c	organi	zatio	ns the	e org	anızatı	on su	oqqı	rts.						
	4 (i)	lame o Orgai					(ii) EIN		((descrit above	or IRC	ganizati lines 1- C sections))	.9 n	organiza (i) liste		n col rour	the orga	you notify nization in (i) of upport?	organiza (i) organ	Is the ition in col- lized in the S ?	(vii) Aı	mount of S	upport
										<u> </u>					Yes	1	lo	Yes	No	Yes	No			
										<u> </u>					ļ	+				1				
					l																			
					-+					├						-		-	<u> </u>		-			
										 						+-		 		+	 			
																				1				
					-+					┢						+			-	+	 	-		
Total							<u>-</u>					·												

Schedule A (Form 990 or 990-EZ) 2008 Princess Anne High School Marching Band 51-0211854

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you checke	ed the box on line	5, 7, or 8 of Par	t I.)				
Sec	tion A. Public Support			1	1	<u> </u>		
begi	ndar year (or fiscal year nning in) ト	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008		(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')							
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge							
4	Total. Add lines 1-3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
	Public support. Subtract line 5 from line 4	· · · · · · · · · · · · · · · · · · ·			:			
Sec	tion B. Total Support			 		1	-	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	3	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
9	Net income form unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ	ities, etc. (see in	structions)	•	•	Ĺ	12	
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth,	or fifth tax year a	s a section 5	01(c)(3)) <u>• </u>
	tion C. Computation of Pul		 	_ -				
	Public support percentage for 20 Public support percentage for 20	•	•			-	14 15	<u>%</u> %
		•	,			L		
	33-1/3 support test — 2008. If the and stop here. The organization	qualifies as a pul	blicly supported o	rganızatıon.		•		▶ []
	33-1/3 support test — 2007. If the and stop here. The organization	qualifies as a pul	blicly supported o	rganızatıon	• •			- 📙
17 a	a 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	s box and stop he	re. Explain in	Part I\	/ how
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-cırcumstance test The organı	s' test, check this zation qualifies a	s box and stop he s a publicly suppo	r e. Explain in orted organiza	Part IN ation	/ how the ►
18	Private foundation. If the organi	zation did not che	eck a box on line,	13, 16a, 16b, 17	a, or 17b, check ti	nis box and s	ee insti	ructions -

(Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support						,
	ndar year (or fiscal yr beginning in) >	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	32,450.	149,987.	156,885.			339,322.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose.	64,660.					64,660.
3	Gross receipts from activities that are not an unrelated trade or business under section 513	04,000.					0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1-5	97,110.	149,987.	156,885.	0.	0.	403,982.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line	<u> </u>	0.	<u></u>	0.	<u></u>	<u>-</u>
0	7c from line 6.)						403,982.
Sec	tion B. Total Support			L			403, 302.
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6	97,110.	149,987.	156,885.	0.	0.	403,982.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	638.	944.	1,497.			3,079.
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
	: Add lines 10a and 10b	638.	944.	1,497.	0.	0.	3,079.
	Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						0.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
	Total support. (add tns 9, 10c, 11, and 12)						407,061.
14	First five years. If the Form 990 organization, check this box and	is for the organization here	ation's first, secon	d, third, fourth, c	or fifth tax year as	s a section 501(c)	⁽³⁾ ► X
	tion C. Computation of Pul						
	Public support percentage for 20			e 13, column (f))		15	%
16	Public support percentage from 3	2007 Schedule A,	Part IV-A, line 27	g	•	16	%
	tion D. Computation of Inv					· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage f	or 2008 (line 10c,	column (f) divided	by line 13, colur	mn (f))	17	%
18	Investment income percentage fi	rom 2007 Schedul	le A, Part IV-A, Im	ie 27h		. 18	%
	33-1/3 support tests – 2008. If the omore than 33-1/3%, check this b	ox and stop here.	. The organization	qualifies as a pu	blicly supported o	organization	. ▶ 📙
	33-1/3 support tests — 2007. If the support test is not more than 33-1/3%, check					_	, and line 18
	Private foundation. If the organi	zation did not che	ck a box on line 1	19a. or 19b. cl	neck this box and	see instructions	▶

Schedule A Part IV	(Form 9	90 or 9	90-EZ)	2008	Pri	ncess	Anne	High	n Scho	ol Ma	arching	Band	51-02	11854	Page
Part IV	Supple	ement	al Info	rmati	ion. C	omple	ete this	part t	to provi	de the	explana	ation red	quired by	Part II, I	ine 10;
	Part II,	, inte	1/a 01	170,	UI Fa	rt m,	IIIIE 12	. PIOV	ide arry	otriei	auditioi	141 111101	madon. (s	566 111211	uctions)
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Employer Identification number Name of the organization Princess Anne High School Marching Band 51-0211854 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No Yes funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a a Total number of conservation easements. 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? No Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2008 Prince	cess Anne H	igh School Ma	arching Band	51-021	1854	Page 2
Part III Organizations Mainta						
Using the organization's accession that apply):	on and other reco	rds, check any of th	e following that are a s	ignificant use of its colli	ection items (cl	neck all
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e Other				
c Preservation for future gener	ations		•	··· =		
4 Provide a description of the orga Part XIV	nızatıon's collectı	ons and explain how	w they further the orgar	nization's exempt purpo	se in	
5 During the year, did the organiza assets to be sold to raise funds r	ather than to be	maintained as part	of the organization's co	llection?	Yes	No
Part IV Trust, Escrow and Cu IV, line 9, or reported	an amount or	gements Compl Form 990, Part	ete if organization X, line 21.	answered 'Yes' to F	orm 990, Pa	art ———
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian, o	r other intermediary	for contributions or oth	ner assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the follow	ng table			
					Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance.				1f		
2a Did the organization include an a	amount on Form 9	990, Part X, line 21?	•		Yes	No
b If 'Yes,' explain the arrangement		<u>-</u>				
Part V Endowment Funds Co	mplete if orga	nization answer	ed 'Yes' to Form 99	90, Part IV, line 10.		
	(a) Current year	(b) Prior yea	r (c) Two years bac	k (d) Three years back	(e) Four years	s back
1 a Beginning of year balance						
b Contributions						
c Investment earnings or losses						
d Grants or scholarships						
 Other expenditures for facilities and programs 						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentag	e of the year end	balance held as				
a Board designated or quasi-endov	vment ►	<u> </u>				
b Permanent endowment ►	¥					
c Term endowment ►	%					
3a Are there endowment funds not organization by:	in the possession	of the organization	that are held and adm	inistered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations.					3a(ii)	
b If 'Yes' to 3a(II), are the related of	organizations liste	ed as required on So	chedule R?		3b	
4 Describe in Part XIV the intender	d uses of the orga	anization's endowm	ent funds			
Part VI Investments-Land, B	uildings, and	Equipment. See	Form 990, Part X	, line 10.		
Description of investment	(a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Va	alue
1a Land						
b Buildings						
c Leasehold improvements			4,344.	2,682.		,662.
d Equipment			57,024.	30,870.	26,	,154.
e Other .						
Total. Add lines 1a-1e (Column (d) shi	ould equal Form	990, Part X, column	(B), line 10(c))	. , , ,	27,	816.
BAA				Sched	lule D (Form 99	0) 2008

Schedule D (Form 990) 2008 Princess Anne High			51-0211854	Page 3
Part VII Investments-Other Securities See Fo		ne 12. N/A		
(a) Description of security or category (including name of security)	(b) Book value	(c) Cost or	Method of valuation end-of-year market value	
Financial derivatives and other financial products				
Closely-held equity interests			· -	
Other				
		<u> </u>	<u>-</u>	
				
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12)				
Part VIII Investments-Program Related (See F				
(a) Description of investment type	(b) Book value	Cost or) Method of valuation end-of-year market value	
				
				
Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13)				
Part IX Other Assets (See Form 990, Part X,	line 15) N/A			
	scription	·	(b) Book	value
				
				
				
· · · · · · · · · · · · · · · · · · ·				
Total. Column (b) Total (should equal Form 990, Part X, co	l.(B), line 15)		•	
Part X Other Liabilities (See Form 990, Part				
(a) Description of Liability	(b) Amount			
Federal Income Taxes	1			t
Rounding		2.		ì
				
		\dashv		
		 		•
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	•	2.		
In Part XIV, provide the text of the footnote to the organiza	tion's financial stateme		ganization's liability for uncert	aın tax

positions under FIN 48

Schedule D (Form 990)	2008 Princess Anne High School Marching Band 5	1-0211854	Page 4
	iation of Change in Net Assets from Form 990 to Financial Statements	N/A	
	rm 990, Part VIII,column (A), line 12)		
2 Total expenses (F	form 990, Part IX, column (A), line 25)		
3 Excess or (deficit)) for the year Subtract line 2 from line 1	<u> </u>	
4 Net unrealized gain	ins (losses) on investments.	<u> </u>	
5 Donated services	and use of facilities		
6 Investment expens		-	
7 Prior period adjust			
8 Other (Describe in		-	
•	(net) Add lines 4-8		
) for the year per financial statements. Combine lines 3 and 9	Poturn NI/7	
	iation of Revenue per Audited Financial Statements With Revenue per F	Return N/A	7
-	ins, and other support per audited financial statements I on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gai		1	
-	and use of facilities 2b	┪	
c Recoveries of prior		┦	
d Other (Describe in	, , , , , , , , , , , , , , , , , , , ,	\dashv \mid	
e Add lines 2a throu		2 e	
3 Subtract line 2e fr		3	
	I on Form 990, Part VIII, line 12, but not on line 1:		
	nses not included on Form 990, Part VIII, line 7b		
b Other (Describe in		-	
c Add lines 4a and 4	1.5	4c	
	Id lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
	liation of Expenses per Audited Financial Statements With Expenses pe	r Return N	/A
	nd losses per audited financial statements .	1	
•	f on line 1 but not on Form 990, Part IX, line 25		
	and use of facilities 2a		
b Prior year adjustm		7	
	on Form 990, Part IX, line 25	7	
d Other (Describe in		7	
e Add lines 2a throu	-		
3 Subtract line 2e fr		3	
4 Amounts included	f on Form 990, Part IX, line 25, but not on line 1:		
a Investments expe	enses not included on Form 990, Part VIII, line 7b		
b Other (Describe in	n Part XIV). 4b	7	
c Add lines 4a and	4b	4c	
5 Total expenses A	Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	5	
Part XIV Supplen	nental Information		
Complete this part to pi line 4; Part X; Part XI, I	rovide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part I line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	V, lines 1b and	d 2b, Part V,
			_ ·
			-
			-
			-

Scheaule D	Form 990) 2008 P	age 5
Part XIV	Supplemental Information (continued)	
-		

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

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ion raised lunds thi	rougn any	or the foil			
				_	
			Special fundraising	events	
ten or oral agreeme	ent with ar	y individu	al (including officers, di	rectors, trustees or key	/ Dv. 🗹
id individuals or ent	tities (func	lraisers) p	ursuant to agreements	under which the fundra	niser is to be
T T	1 01111 990	LZ IIIEIS	T Tot required to com		<u> </u>
(ii) Activity			(iv) Gross receipts	(or retained by)	(vi) Amount paid to
``			from activity		(or retained by) organization
				COI (I)	Organization
	Yes	No			
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	1				
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		• •		<u> </u>	
anızatıon ıs registei	red or lice	nsed to so	licit funds or has been	notified it is exempt fro	om registration
	-				
					
		-		-	
				 	
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			·	-	
	- -		· -		
	es. Complete if ion raised funds the ion raised funds the Part VII) or entity indicated individuals or entity the organization (ii) Activity	ten or oral agreement with an Part VII) or entity in connected individuals or entities (function the organization of Form 990 (iii) Activity (iiii) Did have custor of control Yes	ten or oral agreement with any individue Part VII) or entity in connection with part dindividuals or entities (fundraisers) pay the organization of contributions? (ii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No	es. Complete if the organization answered 'Yes' to ion raised funds through any of the following activities. Check Solicitation of non-Solicitation of gove Special fundraising ten or oral agreement with any individual (including officers, di Part VII) or entity in connection with professional fundraising and individuals or entities (fundraisers) pursuant to agreements by the organization. Form 990EZ filers are not required to come (ii) Activity (iii) Did fundraiser have custody or contributions? Yes No Yes No Animals of the following activities. Check Solicit funds or has been animals from activity or	cool Marching Band S1-021185 Ses. Complete if the organization answered 'Yes' to Form 990, Part IV Ion raised funds through any of the following activities Check all that apply Solicitation of non-government grants Solicitation of government grants Special fundraising events Iden or oral agreement with any individual (including officers, directors, trustees or key Part VII) or entity in connection with professional fundraising services? Iden individuals or entities (fundraisers) pursuant to agreements under which the fundration or government grants Special fundraising events Identity in connection with professional fundraising services? Identity in connection with professional fundr

	:	Fundraising Events. Complete reported more than \$15,000 on		hool Marching B nswered 'Yes' to Fo a. List events with a		ne 18, or ater than \$5,000.
		Toportou more than \$10,000 on	(a) Event #1 Bingo	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through
R			(event type)	(event type)	(total number)	col. (c))
REVENUE	1	Gross receipts	1,192,826.			1,192,826.
E	2	Less: Charitable contributions				
	3	Gross revenue (line 1 minus line 2)	1,192,826.			1,192,826.
	4	Cash prizes	912,085.			912,085.
D R E C T	5	Non-cash prizes				
- 1	6	Rent/facility costs	101,000.			101,000.
EXPENSES	7	Other direct expenses	130,687.			130,687.
Ë	8	Direct expense summary. Add lines 4-	through 7 in column (d)		•	1,143,772.
<u> </u>		Net income summary. Combine lines 3		11. 5 000 5	<u> </u>	49,054.
Parl	111	Gaming. Complete if the organi \$15,000 on Form 990-EZ, line 6	zation answered 'Ye a.	s' to Form 990, Par	t IV, line 19, or re	ported more than
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col (c))
Ë	1	Gross revenue				
	2	Cash prizes				
D X P R E N C S	3	Non-cash prizes				
C S T E S	4	Rent/facility costs	<u></u>			
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary Add lines 2 to	hrough 5 in column (d)		•	
	8	Net gaming income summary Combine	e lines 1 and 7 in column	(d)		

9	Enter the state(s) in which the organization operates gaming activities.		
á	Is the organization licensed to operate gaming activities in each of these states?	9a	
t	olf 'No,' Explain:		
10 a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	<u> </u>
ŀ	olf 'Yes,' Explain:		
11	Does the organization operate gaming activities with nonmembers?	11	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to		
•-	administer charitable gaming?	12	

Schedule G (F	orm 990 or 990-EZ) 200	Princess A	nne High	School	Marching	Band	51-021185	4	Р	age 3
					- -				YES	NO
13 Indicate	the percentage of gamin	g activity operated	ın t							i
a The orga	nization's facility					13a	%	.		į
b An outsi	•					13b	<u> </u>]		į
14 Provide	he name and address of	the person who p	prepares the or	rganızatıon	's gaming/spec	ial events boo	oks and records.			i
Name:										1
Address	<u></u>									
	organization have a cor							15 a		
	enter the amount of gam				\$	and	the amount			1
	g revenue retained by th			·					:	
c If 'Yes,'	enter name and address									
Name:										! ! !
Address	<u>-</u>									
16 Gaming	manager information									
Name.										
Gaming	manager compensation	▶ \$								
			_							
Descript	on of services provided.									
Dıre	tor/officer	Employee		Indepe	endent contract	or				
17 Mandato	ry distributions									
a Is the or state ga	ganization required unde ning license?	r state law to mak	e charitable d	stributions 	from the gamı	ng proceeds t	o retain the	17a		'
b Enter th	amount of distributions	required under st	ate law distribi	uted to oth	er exempt orga	ınızatıons or s	pent in the			
organiza	tion's own exempt activit	ies during the tax	year: ►\$							
BAA			TEEA370	3L 07/18/08		Sche	dule G (Form 99	0 or 99	0-EZ)	2008

SCHEDIII E I	Cranto and Other Accidence to Organizations	OMB No 1
(Form 990)	Governments and Individuals in the U.S.	20(
Department of the Treasury Internal Revenue Service	 Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22. Attatch to Form 990. 	Open to Inspec
Name of the organization	Employer ides	Employer identification number
Princess Anne	Princess Anne High School Marching Band	11854
Part I General In	Part I General Information on Grants and Assistance	
1 Does the organizathe selection crite	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	Yes

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

2 ___

Open to Public Inspection

OMB No 1545-0047 2008

Schedule I (Form 990) 2008	Sche	12/19/08	TEEA3901L 12/19/08	or Form 990.	e the Instructions f	action Act Notice, se	BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
•						ions	3 Enter total number of other organizations
					organizations	3) and government of	
							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		!					
(h) Purpose of grant or assistance	(g) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of non-cash assistance	(d) Amount of cash grant	(c) IRC section if applicable	(b) EIN	1 (a) Name and address of organization or government
	יים וווסום הוסוית ליס"י		9 10 01 E XOO SIIII	iniore triari \$5,000. Crieck tris box il no orie recipient received more triari \$5,000. Ose space is needed	itional space is i	Form 990) if add	Part IV and Schedule I-1 (Form 990) if additional space is needed
Yes' on Form	tion answered "	te if the organiza	ed States. Comple	zations in the Unit	ents and Organi	nce to Governm	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form one Dart IV the 21 for said that the test of Dart IV the 21 for said that the test of the

Page 2 Schedule I (Form 990) 2008 **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 51-0211854 (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 17,000. Princess Anne High School Marching Band (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Scholarships to band members Schedule I (Form 990) 2008 Part III Part IV 111 BAA

SCHÉDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization	Employer identification number	
Princess Anne High School Marching Band	51-0211854	
Form 990, Part III, Line 4d - Other Program Services Description		
Scholarships to Individuals		
	·	
Form 990, Part VI, Line 3 - Description of Delegated Duties to Management Company		
Through subcommittees		
Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents		
Review of By-Laws		
Form 990, Part VI, Line 5 - Description of Material Diversion of Assets		
Theft from Bingo receipts. It is currently under investigation by the Virginia State		
Gaming Commission		
Form 990, Part VI, Line 10 - Form 990 Review Process		
No review was or will be conducted.		
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available		
Upon request by interested party		
		
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